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CONFIRMATION NO. 7390

Bib Data Sheet

SERIAL NUMBER 09/328,856	FILING OR 371(c) DATE 06/09/1999 RULE	CLASS 705	GROUP ART UNIT 2164	ATTORNEY DOCKET NO. 3144.01A
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APPLICANTS
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**** CONTINUING DATA *******
 This appln claims benefit of 60/088,969 06/10/1998

**** FOREIGN APPLICATIONS *******

IF REQUIRED, FOREIGN FILING LICENSE GRANTED
**** 06/30/1999**

Foreign Priority claimed <input type="checkbox"/> yes <input type="checkbox"/> no	STATE OR COUNTRY CT	SHEETS DRAWING 3	TOTAL CLAIMS 45	INDEPENDENT CLAIMS 3
35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance				
Verified and Acknowledged	Examiner's Signature	Initials		

ADDRESS
27496

TITLE
METHOD AND SYSTEM FOR PROVIDING INSURANCE PROTECTION AGAINST LOSS OF RETIREMENT ACCUMULATIONS IN A TAX FAVORED DEFINED CONTRIBUTION PLAN IN THE EVENT OF A PARTICIPANT'S DISABILITY

FILING FEE RECEIVED 2295	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees
		<input type="checkbox"/> 1.16 Fees (Filing)
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Tim
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